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## **UTILITY PATENT APPLICATION TRANSMITTAL**

□ DUPLICATE

Address to:
Commissioner for Patents
Box PATENT APPLICATION
Washington, DC 20231

Attorney Docket No.	CHIA3024/EM/6928
First Named Inventor (or identifier)	Hsiang-Yu CHIANG
Total Pages	20

Box PATENT APPLICATION Washington, DC 20231					First Named Inv (or identifier)	ventor Hsiang-Yu CHIAN			}		
					Total Pages		20				
Transmitted herewith is a patent application under 37 CFR 1.53(b).											
Entitled: Communication System of Automatically Setting Basic Data of IP Devices								sic Data of Voic	e Over		
Ø	1.	Submitted herewith are the following:									
		14 pages of specification.  1 Abstract. 1 sheet(s) of drawings. (Fig. 1) 6 claim(s). 1 Oath/Declaration signed by each inventor. 2 Preliminary Amendment. 2 Information Disclosure Statement(s). 2 pages of Form PTO-1449, and one copy of each document listed thereon. 1 Assignment of the invention, Cover Sheet, and payment of the \$40.00 recordal fee. 2 certified copy of application no filed in Priority is claimed. 2 check in the amount of \$ including any assignment recordal fee.									
	2.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.									
	3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.									
	4.	Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed									
	5.	Insert before the first sentence of the specification: This application is a Continuation-in-part of nonprovisional application number filed									
	6.	Other:									
Reg	No. 2	5,893; Richa	ard E. F	epresenting applicant Fichter, Reg. No. 26,3 2; and Benjamin E. U	382; Thomas	J. Moore,					
THE FILING FEE IS CALCULAT				EE IS CALCULATED AS FO	D AS FOLLOWS:			Basic Fee:	\$710.00		
Total Claims: 6		6	- 20 =				X \$18 =				
	Independent Claims: 1		- 3=				X \$80 =				
Alexandria, VA 22314-1176					Multiple Dependent Claim (add \$270.00):						
			loor			Subtotal:			710.00		
			77/6			50% Reduction if Small Entity Status:					
Phone: 703-683-0500				Fax: 7	: 703-683-1080			Total:	710.00		
Date:				Name:	lame:		Signature:				
June 25, 2001				Eugene Mar					25,893		